

Division of Aging Services

***Appendix D APS Contact and
Documentation Standards***

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Intake and Investigation

1. Intake


Contact or Documentation Standard & APS Policy and/or Training Guide Reference. Critical [C] or Procedural [P] Standard	Required Documentation or Responsibility Critical: If this is not done, this may cause harm to client/ward. Procedural: Process according to APS policy.	Performance Measure	Staff Responsible
<p>1.1 Central Intake (CI) staff will complete and send all accepted APS reports to the field within 1 business day of the date of report. [C]</p> <p>Policy/Training Guide reference: 2002.4</p>	<ul style="list-style-type: none"> • CI staff will enter required report data into the DAS Data System and notify the Supervisor (designee)/ District Manager (DM) by email of the report within 1 business day of the acceptance of the report. • The APS report will contain the full name and title of the CI staff. • The e-mail will indicate (at minimum) the DAS Data System Client ID, client name, county of residence and that this is an accepted report. • In the event that email is not available, CI staff will fax a copy of the DAS Data System APS Intake report and follow up with a telephone call to the receiving APS Supervisor (or designee)/DM within 1 business day. • Should a fax machine and email not be available, CI staff will telephone the receiving Supervisor (or designee)/DM and provide the DAS Data System Client ID. • Should AS Data System not be available, CI staff will document the report using the DAS Data System Intake and Referral form and supporting addendum. The report will be sent to the field by email, fax or telephone. • CI staff will review the APS Intake and Referral Report to ensure all reports entered are available to the Supervisor (or designee) and/or DM responsible for assigning the investigation. 	<p>Target: 100% of all accepted APS reports are received by field staff within 1 business day.</p> <p>Measure: % of intakes received in the field within 1 business day.</p>	<p>APS CI Staff</p>

<p>1.2 Central Intake (CI) staff will clearly indicate all APS Reports that are considered “high priority/high risk” situations [C]</p> <p>Policy/Training Guide reference: 2001.5 & 2002.1</p>	<ul style="list-style-type: none"> • CI staff will mark “Priority Req.” and describe the potential risk to the client on all APS DAS Data System Intake and Referral “meets criteria” records to indicate that the Intake is a “high priority/high risk situation.” • CI staff will notify the APS Supervisor (or designee)/DM about all high priority/high risk reports via email with a high priority designation (“red envelope”) to indicate that the report is a high priority and/or high-risk situation. • In the event that email is not available, CI staff will fax a copy of high priority/high risk reports (with a cover sheet indicating the high priority/high risk) and follow up with the receiving APS Supervisor (designee)/DM by telephone. • Should a fax machine or email not be available, CI staff will telephone the receiving Supervisor (or designee) or DM with the minimum high risk/high priority report information. • CI staff will check the APS Intake and Referral Report to ensure all reports entered are available to the field Supervisors. 	<p>Target: 100% of all records with a “priority req.” designation describe the potential risk in the APS report.</p> <p>Measure: % intakes that have a description of the high-risk situation in the APS report.</p>	<p>APS CI Staff</p>
<p>1.3 Central Intake (CI) staff will document all reported safety issues in the APS Report [C]</p>	<ul style="list-style-type: none"> • Safety issues that may endanger the client and/or case manager (CM) [i.e., hostile client, hostile family member, structurally unsafe home, location of the neighborhood, isolated location, high crime area/loiters, animals/pets, mental illness (client or household member), illegal drug activity (client or household member), weapons (client or household member) or other pertinent safety issues] will be recorded in DAS Data System or on the hard copy of the APS Addendum (if DAS Data System is not available) by CI staff. • The Intake Record will indicate if law enforcement should be contacted and/or accompany the CM when the initial face to face visit with the client is made. • CI staff will also document the absence of safety risks if none are reported at the time of the report. 	<p>Target: 100% of all intake records include documentation on safety issues or that no safety issues exist for the client and/or CM.</p> <p>Measure: % of intake records that document if safety issues are present or not present at the time of the intake.</p>	<p>APS CI Staff</p>

<p>1.4 Central Intake(CI) will notify the APS Field Supervisor (designee)/DM and assigned Case Manager (CM) of any new reports (i.e., additional allegations) of abuse, neglect & or exploitation (ANE) of an existing client within 1 business day of the receipt of the report [C]</p> <p>Policy/Training Guide reference: 2002.4</p>	<p>CI will document (using “Add Comments”) the allegations of ANE Electronic Data Record. An e-mail will be sent to the APS Field Supervisor (or designee)/DM and assigned CM that contains the name of the client, DAS Data System Client ID and indicate that additional ANE allegations have been added to the DAS Data System.</p>	<p>Target: <i>100% of all subsequent reports are entered into DAS Data System“ Add Comments” section of the APS Intake and Referral record</i></p> <p>Measure: % of intake records with subsequent reports entered in DAS Data System within 1 business day of the receipt of the new report (allegations).</p>	<p>APS CI Staff</p>
<p>1.5 Central Intake (CI) staff will send APS Acknowledgment Letters to reporters within 10 calendar days of the date the report was accepted for investigation, with a copy maintained in the Electronic Data Record, unless the reporter waives the letter. [P]</p> <p>Policy/Training Guide reference: 2002.7</p>	<p>All acknowledgment letters will contain the name/address of the reporter, the allegations, the name of the client and the name of the CI staff who accepted the report.</p> <p>A log listing the name and address of the reporter and the date the acknowledgment letter was sent will be maintained by the CI Supervisor.</p> <p>A copy of the acknowledgment letter will be maintained in the Electronic Data Record.</p> <p>CI staff will indicate, in the DAS Data System, if the reporter waived the receipt of the acknowledgment letter.</p>	<p>Target: <i>100% of reporters (unless waived) are sent acknowledgment letters within 10 calendar days of the date the report was made to CI.</i></p> <p>Measure: % of acknowledgment letters sent to reporters that were not waived by the reporter within 10 calendar days of the date of report</p>	<p>APS CI Staff</p>


2. Investigation


Contact or Documentation Standard	Required Documentation or Responsibility	Performance Measure	Staff Responsible
<p>2.1 The APS Field Supervisor (or designee/DM) will assign all reports to APS Case Managers (CM) no later than one (1) business day from the date the report is received by the supervisor or designee. [C]</p> <p>Policy/Training Guide reference: 2002.4</p>	<p>The APS Field Supervisor or designee or DM will:</p> <ul style="list-style-type: none"> • identify the CM assigned to complete the investigation, • enter the name of the case manager in the DAS Data System and • notify the CM of the assignment by email. <p>In the event that the case was previously opened in DAS Data System with another CM assigned, the Supervisor (or designee or DM) will enter into an APS Investigation Contact Record:</p> <ul style="list-style-type: none"> • the name and region of the previous CM • the dates when the previous CM managed was assigned the case (using the last intake begin date and the closure date for the case, i.e., either in Investigation or On-going • the name and region of the new CM. <p>The CM will acknowledge the receipt of the report by sending an e-mail to the assigning supervisor or designee and DM.</p> <p>The assigned CM, Supervisor or Designee will forward all accepted reports of ANE to local law enforcement (except for cases of self-neglect)</p>	<p>Target: 100% of all APS investigations are assigned to an APS case manager no later than 1 business day from the date of the report</p> <p>Measure: % of APS investigations assigned within 1 business day of date of report</p>	<p>APS Supervisor (or designee/DM)</p>

Contact or Documentation Standard	Required Documentation or Responsibility	Performance Measure	Staff Responsible
<p>2.2 The APS Case Manager (CM) will make the initial face to face visit to the client no later than 10 calendar days from the date the report was accepted by Central Intake (CI) staff. [C]</p> <p>Policy/Training Guide reference: 2003.1</p>	<p>The CM will document the initial client contact including date of contact and if that contact was successful or not successful in the DAS Data System (APS Assessment Contact).</p> <p>Successful client contacts must indicate that the contact made was face to face with the client and that the client was interviewed in private. In the event that the client cannot be interviewed in private, the documentation must show that reasonable attempts were made to interview and/or observe the client in private.</p> <p>The CM shall make reasonable attempts to locate and interview the client and document when attempts have been unsuccessful.</p> <p>“Reasonable attempts” include documentation of a) efforts made to interview the client in a separate area and/or requests to other present to speak privately with the client; b) multiple contacts (2 or more) with the reporter and/or collaterals to determine the whereabouts of the client; c) repeated (2 or more) home visits/field visits/calls to the client’s residence including dates messages left; d) calls and/or visits to local medical facilities, jails, hotels, etc. to locate the client.</p> <p>All attempts made by the CM to meet the response time will be documented in the DAS Data System. Should the attempts be unsuccessful, the CM will discuss with the Supervisor to determine the next steps.</p> <div style="border: 1px solid gray; padding: 5px; margin-top: 10px;"> <p> In order to be <i>in compliance</i> with policy, the initial contact or all attempts at contact must be documented in DAS Data System by the close of business no later than the 10th calendar day from the receipt of the report by CI.</p> </div>	<p>Target: 95% of all initial face to face visits are completed no later than 10 calendar days from the date the report is received from CI.</p> <p>Measure: % of initial face to face visits to the client made within 10 calendar days from the date of report (or documentation in the record indicates attempts were made for a face to face client contact).</p>	<p>APS Case Manager</p>

Contact or Documentation Standard	Required Documentation or Responsibility	Performance Measure	Staff Responsible
<p>2.3 The APS Case Manager (CM) will make contact with the reporter of alleged abuse, neglect and/or exploitation of the subject of an APS report. [P]</p> <p>Policy/Training Guide reference: 2003.2</p>	<p>CM shall document any actual or attempted contact (e.g., telephone, mail, e-mail, in person) with the original reporter of abuse, neglect and/or exploitation of the subject of the APS investigation. In the event that contact with the reporter may endanger the reporter and/or the disabled adult/elder person, the CM shall document the reason(s) why such contact could not be made and the endangerment posed to the reporter and/or disabled/elder person.</p>	<p>Target: <i>A minimum of 1 contact (actual or attempted) is made with the reporter.</i></p> <p>Measure: 100% of all DAS Data System client records will include at least 1 contact or attempted contact with the reporter.</p>	
<p>2.4 The APS Case Manager (CM) will complete collateral contact(s) with persons, witnesses and/or professionals who have knowledge or information concerning the client. [C]</p> <p>Policy/Training Guide reference: 2003.4</p>	<p>CM shall document, at a minimum, one collateral contact with individuals who have knowledge or information regarding the client for the APS investigation/assessment. Collateral contacts include caregivers, financial institutions, financial managers (e.g., conservators, representative payees), household members, service providers, family members not living in the household and any other individuals who have knowledge or information about the client. A comprehensive investigation/assessment requires that all persons with knowledge of the situation be contacted.</p>	<p>Target: <i>A minimum of 1 collateral contact is made to persons with knowledge/information concerning the client.</i></p> <p>Measure: % records with a minimum of 1 collateral contact</p> <p>(Baseline)</p>	<p>APS Case Manager</p>
<p>2.5 The APS Case Manager (CM) will investigate new allegations made to APS Centralized Intake on an open APS case within 5 business days of the additional report. [C]</p> <p>Policy/Training Guide reference: 2003.1</p>	<p>CM will commence the investigation of new allegations and/or reports of abuse, neglect and/or exploitation of a client in investigation status/ongoing status within 5 business days of receipt of the report by CI. If the allegations describe a situation in which the individual is in imminent risk of A/N/E, the Supervisor will instruct the CM to investigate the allegations within 1 business day of the receipt of the report of the new allegations.</p>	<p>Target: <i>100% of all new allegations are investigated with 5 business days reported</i></p> <p>Measure: % of reports where new allegations were investigated within 5 business days.</p>	<p>APS Case Manager</p>
<p>2.6 The APS Case Manager (CM) will conduct an interview with the alleged perpetrator, as indicated or implicated in the report</p> <p>(P) Policy/Training Guide reference: 2003.4</p>	<p>CM will conduct an interview (face to face, telephone and/or email) of the alleged perpetrator unless an interview endangers the client and/or CM.</p> <p>The CM will document successful contacts or unsuccessful attempted contact(s) with the perpetrator. The CM will also document the risk posed to the CM and/or client when an interview is not completed.</p>	<p>Target: <i>95% of all records show actual/attempted contacts with alleged perpetrator(s)</i></p> <p>Measure: #/% of records showing actual/attempted contacts with alleged perpetrator(s)</p>	<p>APS Case Manager</p>

Contact or Documentation Standard	Required Documentation or Responsibility	Performance Measure	Staff Responsible
<p>2.7 The APS Case Manager (CM) shall review the “Notification of Privacy Practices” (HIPAA) document with the client or representative. [P]</p> <p>Policy/Training Guide reference: 2003.3</p>	<ul style="list-style-type: none"> • CM will review the notification with the client or representative (e.g., guardian, POA, parent, etc.). • The client or representative will acknowledge the receipt of the document by his/her signature (or mark) and a copy shall be issued to the client. • The original notification will be filed in the case file. • Documentation of the HIPAA discussion will be in DAS Data System. 	<p>Target: <i>100% of all hard records contain a signed HIPAA form.</i></p> <p>Measure: % of records with HIPAA form in the hard record.</p>	<p>APS Case Manager</p>

Contact or Documentation Standard	Required Documentation or Responsibility	Performance Measure	Staff Responsible
<p>2.8 The APS Case Manager (CM) will complete the investigation within 30 business days/45 days from the date the report was accepted by Central Intake (CI). [C & P]</p> <p>Policy/Training Guide reference: 2003.5</p>	<p>CM will complete in Electronic Data Record:</p> <ul style="list-style-type: none"> • The APS Assessment. <ul style="list-style-type: none">  The ADL and Self-Sufficiency Sections are no longer required to be completed due to the implementation of the DON-R. The Assessment must address any areas of ANE identified during the investigation; physical impairments; physical/medical condition; mental status; client’s living environment; caregiver and/or alleged perpetrator involvement with the client and supportive services (e.g., medical, social services, etc). The documentation must also include plans to address any areas of vulnerability and risk of further endangerment. • The DON-R (i.e. including scores and comments sections). The comments section must include an explanation of any functional impairment and/or unmet need identified during the assessment that does or may contribute to the client’s risk for ANE. • APS Investigation Contacts (to clients and/or collaterals). The contacts shall describe all actual and/or attempted contacts with the client and/or collaterals, successful and/or unsuccessful. • The Justification Statement which includes the determination findings (substantiated/unsubstantiated) and indicate if the client is <ul style="list-style-type: none"> ◦ personally vulnerable ◦ socially vulnerable ◦ endangered/“at risk” and <ul style="list-style-type: none"> ▪ in need of on-going APS; or ▪ the client is not at risk and not in need of on-going services; or ▪ the client is at risk and refuses services. • For cases substantiated for any allegations except self-neglect or self-abuse, the date the law enforcement report is made, along with the assigned LE jurisdiction will be entered into the 	<p>Target: 85% of all investigations are completed within 30 business days from the date the report was received by CI.</p> <p>Measure: #/% investigations completed within 45 days of the date the report was received by CI.</p> <p>Target: 100% of APS clients have a completed DON-R assessment during the APS Investigation.</p> <p>Measure: % of client records with a DON-R completed during the APS Investigation.</p> <p>Target: 100% of all investigation records include a determination finding (i.e., personally vulnerable, socially vulnerable, at risk/endangered and in need (or not in need) of APS on-going service).</p> <p>Measure: % investigation records that include determination findings</p>	<p>APS Case Manager/APS Supervisor (or designee)</p>
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Contact or Documentation Standard	Required Documentation or Responsibility	Performance Measure	Staff Responsible
<p>2.9 The Supervisor (or designee) will close out the APS Investigation upon completion by the Case Manager [C]</p>	<p>Supervisor will complete in Electronic Data Record:</p> <ul style="list-style-type: none"> • A review and verification of <ul style="list-style-type: none"> ◦ the investigation findings ◦ the Assessments (DON-R, APS Assessment, etc.) ◦ Investigation Contacts ◦ Justification statement ◦ Law Enforcement reporting date • Documentation of a case staffing in an Investigation Contact Note or the Justification Statement • The “concur” and investigation complete date to indicate that he/she agrees with the findings and determination of the case <p> In order to be <i>in compliance</i> with policy, the investigation “concur” date (i.e. closure of the investigation) in DAS Data System must be dated on or before the 45th day from the receipt of the report by CI.</p>	<p>Target: 100% of all completed investigation are closed within 30 business days from the date the report was received by CI.</p> <p>Measure: #/% investigations closed within 45 days of the date the report was received by CI.</p>	

Contact or Documentation Standard	Required Documentation or Responsibility	Performance Measure	Staff Responsible
<p>2.10 The APS Case Manager (CM) will send a written report to law enforcement for all cases substantiated for abuse, neglect and/or exploitation by others, prior to but no later than the completion of the investigation. [C]</p> <p>Policy/Training Guide reference: 2003.7</p>	<p>Case managers will complete and send a written report to law enforcement and the State Office for all substantiated cases of ANE (other than self-neglect or self-abuse) prior to but no later than the date the investigation is substantiated and the investigation is closed.</p> <p>The report will contain, at minimum:</p> <ul style="list-style-type: none"> • the name of the client; • the name(s) of the CM for the case (note: if one CM investigates and another will do on-going services, both names will appear on the report); • the date/time period of the investigation; • the allegations at the time of report; • the CM findings; • any attachments (e.g., pictures) that provide forensic evidence obtained during the investigation; • the disposition of the case (if the client has accepted services, etc.); • a contact name, telephone number and e-mail address for the CM and • the name of the APS Supervisor. <p>This standard does not preclude any APS case manager (or other APS staff) from making a report (e.g., telephone call) to law enforcement/prosecutors prior to the substantiation of an ANE investigation to ensure timely involvement of law enforcement in the investigation. However, any contact made prior to sending the DAAR must be referenced in the APS investigation notes and in the official DAAR report when sent to law enforcement and/or the prosecutor's office.</p>	<p>Target 1: <i>A written report will be sent to law enforcement on 100% of all cases substantiated for abuse, neglect or exploitation (except self-neglect and/or self-abuse)</i></p> <p>Measure: % of written reports sent to law enforcement that indicates a date that is on or before the date of the case determination.</p>	<p>APS Case Manager</p>

Contact or Documentation Standard	Required Documentation or Responsibility	Performance Measure	Staff Responsible
<p>2.11 All APS Investigation Contact Records will contain the full name, title and Region (or indicate that the writer is with a District or 2 Peachtree State Office staff, if applicable) of persons who complete documentation in the APS Investigation Contact Record [P]</p>	<p>All staff documenting in the DAS Data System APS Investigation Contact must record his/her full name, title and Region (or indicate that the writer is with a District or 2 Peachtree State Office staff, if applicable) at the beginning each APS Investigation Contact note.</p>	<p>Target: <i>100% of all Investigation Contact records include the APS staff's full name, title and Region (or indicate that the writer is with a District or 2 Peachtree State Office staff, if applicable) at the beginning each APS Investigation Contact note.</i></p> <p>Measure: % records containing APS staff's full name, title and Region (or indicate that the writer is with a District or 2 Peachtree State Office staff, if applicable) at the beginning each APS Investigation Contact note.</p>	<p>All staff</p>

Ongoing and Closure

3. Ongoing, Representative Payee and Closure

Contact or Documentation Standard	Required Documentation or Responsibility	Performance Measure	Staff Responsible
<p>3.1 A written case plan will be completed within 10 calendar days of the date of the initial justification, when a case is substantiated and opened for on-going services. [P]</p> <p>Policy/Training Guide reference: 2004.2</p>	<ul style="list-style-type: none"> • The APS CM (on-going) will consult with the APS CM (investigation, if different from the on-going CM), to develop the case plan with the client. • The case plan will include: <ul style="list-style-type: none"> ◦ one or more targeted case management areas of focus (i.e., Medical, Social, Nutritional, etc.). ◦ at minimum, one (1) goal, with related steps and timeframes for completion of the goal/steps, to assist the client in eliminating and/or reducing abuse, neglect and/or exploitation. ◦ FSW services and/or community resources are involved, if appropriate. ◦ steps (activities/tasks) that include client participating and agreement by the client to complete the steps, with or without assistance or documentation (in the DAS Data System case management record) that the client is unable to participate in the case plan; and ◦ documentation of a discussion about the case plan with the client including a statement that “the field visit was made for the purpose of developing the case plan with the client”. • A completed case plan will be entered into DAS Data System within 10 calendar days of the initial justification statement. The begin date of the initial case plan will be the same as the initial justification date. • The Supervisor will review the case plan in the DAS Data System for approval and document the approval in the DAS Data System. • The CM will obtain the signature or mark of the client or representative (e.g., guardian, POA, parent, etc.) to indicate that client agrees with the case plan. In the event that the client refuses to sign the case plan or is unable to sign the case plan, documentation should be entered in the DAS Data System to indicate why a case plan signed by the client or his/her representative is not in the file. The CM and Supervisor are to sign the case 	<p>Target: 100% of case plans are completed within 10 calendar days of the date of the initial justification to open an on-going case.</p> <p>Measure: #/% case plans completed within 10 calendar days of the date of the initial justification to open an on-going case.</p> <p>Target: 100% of all case plans are signed by the client (includes client’s “mark”) or his/her representative or include a statement in the DAS Data System by the APS staff why the client was unable to sign the case plan.</p> <p>Measure: % of case plans with signatures or documentation in the record regarding why the case plan was not signed by the client or his/her representative.</p>	<p>APS Case Manager (on-going), APS Case Manager (investigation, if different from on-going),</p>
<p>14 Ongoing and Closure</p>	<p>plan. The signatures on the case plan</p>		


Contact or Documentation Standard	Required Documentation or Responsibility	Performance Measure	Staff Responsible
<p>3.2 A client consent for on-going services (i.e., Case Management Agreement Form) will be completed within 10 calendar days of the date for which the client is eligible for APS on-going services [P]</p> <p>Policy/Training Guide reference: 2004.2</p>	<ul style="list-style-type: none"> The CM will obtain the DAS Data System number and signature of the client or representative (e.g., guardian, POA, parent, etc.) on the Targeted Case Management Agreement Form for on-going APS Case Management Services. The begin date of TCM services will be the same date as the initial justification date. The Targeted Case Management Agreement Form will be filed in the physical record of the client. In the event that the client refuses to sign the Case Management Agreement or is unable to sign the Case Management Agreement, documentation should be entered in the DAS Data System to indicate why a Case Management signed by the client or his/her representative is not in the file 	<p>Target: <i>100% of signed client consent forms (i.e. TCM forms) are in the client's physical record.</i></p> <p>Measure: % of signed consent forms (i.e. TCM forms) filed in the hard copy record.</p>	<p>APS Case Manager</p>
<p>3.3 Each client will receive at least one monthly face-to-face contact when the client is receiving APS on-going case management services, unless waived by policy. [C] Policy/Training Guide reference: 2004.3</p>	<ul style="list-style-type: none"> A minimum of one (1) face-to-face contact with the client will be made each month that the client is receiving APS on-going case management services. This visit should be completed by the 15th of the month In the event a monthly face-to-face client contact is waived, the CM will document the approved waived contact with the client or collateral for the month in Electronic Data Record. <p>Monthly visits with the client in his/her home or living environment is the standard practice for APS. Quarterly visit in an alternate setting is required, however if client has no alternate setting, this should be documented in the record.</p>	<p>Target: <i>100% of all on-going clients receive a monthly face to face contact, unless waived by policy.</i></p> <p>Measure: % of cases with a minimum of one face to face monthly case management contact</p>	<p>APS Case Manager</p>
<p>3.4 The CM will document all safety issues that have the potential for serious injury and/or unexpected death during the reporting period. [C]</p>	<p>If the CM identifies issues in the home during the investigation and/or while providing APS on-going services (e.g., loaded guns in the house, rugs or other conditions of the flooring that may lead to falls, etc.), the CM will document that there he/she discussed the safety issues with the client and/or caregiver and strategies to reduce and/or eliminate the potential safety risks.</p>	<p>Measure: % of cases with identified safety issues and supporting documentation to indicate that those issues were address with client and/or caregivers</p>	<p>APS Case Manager</p>

Contact or Documentation Standard	Required Documentation or Responsibility	Performance Measure	Staff Responsible
<p>3.5 Case managers (CM) will document the monthly “service focused” contact for all APS clients. [P]</p> <p>Policy/Training Guide reference: 2004.2</p>	<ul style="list-style-type: none"> • All client face to face service focused contacts will be entered into DAS Data System no later than the 10th day of the occurrence • All other service focused contacts (non- client contact) will be entered into DAS Data System by the 10th day if the occurrence. • The service focused contact will <ul style="list-style-type: none"> ◦ indicate the type of service (i.e., field visit, home visit, telephone call, etc.); ◦ describe what was provided as it relates to the current case plan goal and related steps; ◦ indicate if others were involved with providing the service; ◦ indicate the date the service was provided and <p>Best practice is to complete the written documentation as soon as possible.</p>	<p>Target 1: 100% of TCM face to face contacts are entered in the DAS Data System by the 10th day of occurrence</p> <p>Measure 1: % of monthly face to face service focused contacts entered by the 10th day of occurrence</p> <p>Target 2: 100% of non-client service focused contacts will be entered by the 10th day of occurrence.</p> <p>Measure 2: % of non-client service contacts entered by the 10th day of occurrence</p> <p>Target 3: 100% of all TCM contacts will indicate how the contact was related to the APS case plan (goals/steps)</p> <p>Measure: % TCM contacts related to client’s APS case plan goals/steps</p>	<p>APS Case Manager</p>
<p>3.6 Case Managers (CM) will complete documentation on non-service focused contacts no later than 10 days of occurrence. [P]</p> <p>Documentation and Contact Standards Policy, Section 3</p>	<ul style="list-style-type: none"> • All client/collateral non-TCM contacts will be documented in the DAS Data System no later than 10th day of occurrence date of the contact with the client/collateral. • The non-TCM contact will <ul style="list-style-type: none"> ◦ indicate the date of the contact, the workers' name, title and Region and ◦ describe the nature of the contact as related to the case plan goal(s)/step(s). <p>Best practice is to complete the written documentation as soon as possible.</p>	<p>Target: 100% of all non-TCM contacts are documented in the DAS Data System no later than the 10th day of occurrence of the client/collateral contact.</p> <p>Measure: % of non-TCM contacts documented within 30 days of the client/collateral contact</p>	<p>APS Case Manager</p>

Contact or Documentation Standard	Required Documentation or Responsibility	Performance Measure	Staff Responsible
<p>3.7 Case managers (CM) will make a minimum of one (1) monthly collateral contact to assess ongoing risk of the client and case plan progress towards meeting goals. [C]</p> <p>Policy/Training Guide reference: 2004.3</p>	<ul style="list-style-type: none"> • A minimum of one (1) collateral contact will be entered into the DAS Data System • The collateral contact will include information to substantiate the on-going areas of risk for the client and to address steps/goals in the case plan. • The workers' name, title and Region should be indicated in the entry. • Collateral contacts are to be entered as a separate activity from direct client contact. 	<p>Target: <i>95% of all case records in the DAS Data System will have a minimum of one (1) collateral contact with information to substantiate the on-going areas of risk for the client</i></p> <p>Measure: % of collateral contacts entered in the DAS Data System that include information to substantiate the on-going areas of risk for the client and/or progress towards meeting case plan goals.</p>	<p>APS Case Manager</p>

Contact or Documentation Standard	Required Documentation or Responsibility	Performance Measure	Staff Responsible
<p>3.9 APS Field Staff will notify DAS/APS 2 Peachtree Office of the death, serious injury and/or critical incident of any APS Ongoing client within 5 business days the notification/discovery of the death, serious injury or critical incident. [C]</p> <p>Policy/Training Guide reference: 2004.10 & APS Critical Incident Management Protocol</p>	<p>The CM will:</p> <ul style="list-style-type: none"> • Notify the Field Supervisor of the death, serious injury or critical incident of the DAS APS client. • Document the event in the DAS Data System and forward a copy of the DAS Data System report to the APS Operations Analysis Manager if there are no unusual circumstances surrounding the death, serious injury or critical incident of the APS ongoing client. • If there are unusual circumstances surrounding the death, serious injury or critical incident of the DAS APS client, the case manager will: <ul style="list-style-type: none"> ◦ notify the Supervisor of the death, serious injury or critical incident of the APS ongoing client ◦ discuss the circumstances of the death, serious injury or critical incident with the Supervisor and document his/her findings in the DAS Data System; ◦ notify the District Manager (DM), State APS Office staff via e-mail or telephone call to the State Office for consultation, if needed; ◦ provide any non-DAS Data System documentation to the State Office as needed and/or if requested by the Serious Injury Review Team (SIRT) • Case managers will complete documentation and submit for case closure any incident that results in the death of a DHS ward or APS ongoing client. <p>The Supervisor will:</p> <ul style="list-style-type: none"> • Consult with the APS District Manager and/or State Office staff regarding any death, serious injury or critical incident of a DAS APS client due to an unusual circumstance. • Ensure that the death, serious injury or critical incident report is entered into the DAS Data System within 5 business days of death, serious injury or critical incident. • Close out the record due to the death of the APS ongoing client. 	<p>Measure TBD</p>	<p>APS Case Manager, APS Supervisor, District Mgr. and State Office Staff</p>
<p>18 Ongoing and Closure</p>	<p>The State Office will:</p>		

Contact or Documentation Standard	Required Documentation or Responsibility	Performance Measure	Staff Responsible
<p>3.11 Supervisors or designee will review and approve all Family Service Worker (FSW) requests made by Case Manager (CM) prior to FSWs providing services to clients. [P]</p>	<p>Case managers will request FSW services:</p> <ul style="list-style-type: none"> • Supervisor or designee will approve all FSW requests before service provision • Services to be provided by the FSW will be included in the case plan • FSW and CM will meet to discuss services needed by the client • CM will introduce the FSW to the client and review the needed services with the client 	<p>Target: 100% of all FSW requests will be approved by the APS Supervisor or designee prior to providing FSW services</p> <p>Measure: % of cases requesting APS FSW services approved prior to provision of services</p>	<p>APS Case Manager, APS Supervisor and APS Family Service Worker</p>
<p>3.12 Family Service Workers (FSW) will document all client contacts in Das Data System within 30 calendar days of the date of client contact [C]</p> <p>Documentation and Contact Standards, Section 3</p>	<p>FSWs will document all client contacts in the DAS Data System APS Case Management screen.</p> <p>The FSW contact will:</p> <ul style="list-style-type: none"> • indicate the name/title and region of the FSW providing the service; • the date of the service; • the tasks performed by the FSW as related to the case plan (If the FSW is assisting with bill paying/handling money, the documentation should clearly have denoted what was paid, how much, to whom, when, etc); • Any pertinent information regarding the status of the client during the contact (ex: client illness) <p>The FSW will maintain, in the case record, documentation of all expenditures made on behalf of the client including receipts for the expenditures, if applicable.</p> <p>The CM will consult, at a minimum, on a monthly basis regarding the status of the client</p> <p>The Supervisor will review the FSW documentation in the DAS Data System and meet with the FSW to discuss cases during monthly conference.</p>	<p>Target 1: 100% of FSW contacts are documented in Das Data System within 10th day of occurrence of the date of contact with the client.</p> <p>Measure 1: % of contacts made and documented in the DAS Data System within 10th day of the date of contact with the client.</p>	<p>APS Family Service Worker, APS Case Manager and APS Supervisor</p>

Contact or Documentation Standard	Required Documentation or Responsibility	Performance Measure	Staff Responsible
<p>3.13 All APS cases will be reassessed for risk at least once every 6 months [C]</p> <p>Policy/Training Guide reference: 2004.5</p>	<ul style="list-style-type: none"> • CM will reassess/conduct a redetermination of need for continued APS services for each APS ongoing client at least every 6 months, within 30 days of the expiration of the preceding assessment period • CM will reassess/conduct redeterminations whenever there are substantial or significant changes (improvement or deterioration) in the clients' situation or condition. • CM will complete the DAS Data System Redetermination, DON-R and Case Plan for supervisory review and concurrence. Note: The redetermination will address personal vulnerability, social vulnerability and risk of endangerment. The DON-R will address client unmet needs. The case plan will outline steps to meet needs and reduce risk. 	<p>Target 1: 100% of APS clients are reassessed annually (at minimum) to determine the need for continued APS on-going services</p> <p>Measure 1a: % cases reassessed, at a minimum, annually.</p> <p>Measure 1b: % cases needing on-going services after reassessment.</p> <p>Target 2: Baseline cases reassessed prior to annual reassessment.</p> <p>Measure 2: #/% of cases reassessed prior to the annual reassessment.</p>	<p>APS Case Manager</p>
<p>3.14 An APS case will be closed with supervisory review/approval and notification to others with a “need to know” about the closure. [P]</p> <p>Policy/Training Guide reference: 2004.11</p>	<ul style="list-style-type: none"> • The CM will notify the Supervisor that the case is ready for closure. • The CM will enter the Termination Statement in the Electronic Data Record. • The Supervisor will: <ul style="list-style-type: none"> ◦ review the statement and all APS Case Management documentation prior to approving the closure to ensure that closure should occur; ◦ ensure the closure approval contains the name and date of the supervisor authorizing the closure; and ◦ include a statement of concurrence in the DAS Data System to terminate services and close the client file in the Electronic Data Record <p> Best practice is to notify the APS client when services are being terminated as well as others with a “need to know” interest.</p>	<p>Target 1: 100% of cases closed will be reviewed by the APS Field Supervisor</p> <p>Measure: % of cases closed with written Supervisor concurrence.</p> <p>Target 2: 100% of closed cases will have the required documentation in the case record</p> <p>Measure 2: % of closed cases with the required documentation (e.g., termination statement & supervisor concurrence)</p>	<p>APS Case Manager and APS Supervisor</p>

Contact or Documentation Standard	Required Documentation or Responsibility	Performance Measure	Staff Responsible
<p>3.15 Emergency Relocation Funds (ERF) will be used as a resource to reduce and/or eliminate risk of abuse, neglect and exploitation and address client safety. [P]</p> <p>Policy/Training Guide reference: 2004.8 & ERF Policy</p>	<ul style="list-style-type: none"> • CM will identify the need for ERF resources for clients and discuss the need with the APS Supervisors. • If the ERF request exceeds the case manager/supervisor level approval, the Supervisor will discuss the request with the District Manager and/or state office ERF representative to obtain approval for ERF. • Upon approval for the ERF request (either by the Supervisor/District Manager/State Office staff, the case manager will document the request in the DAS Data System. The Supervisor must review the ERF and “concur” with the request in the Electronic Data Record. • The CM will print the ERF Approval form (s) and attach any pertinent documentation to the request. The CM will obtain the signature of the APS Supervisor. • If the District Manager or State Office staff approval is needed, the Supervisor will document this on the ERF Approval Form. • The CM will take the ERF Approval Form and supporting documentation to the DFCS Regional Accounting Office to authorize the ERF expenditure. • The beginning date of eligibility for the client to receive ERF is the date the supervisor approves the initial expenditure. • A copy of the ERF Approval form and supporting documentation and the copy of the DAS Data System ERF record will be maintained in the client’s hard record. 	<p>Target: 100% of ERF funds are spent for APS client needs</p> <p>Measure 1: % ERF client records that contain a justification statement that supports client’s need for ERF funds.</p> <p>Measure 2: % ERF requests exceeding case manager approval and document the need for additional funds.</p>	<p>APS Case Manager, Supervisor and District Manager</p>